

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P01000033324

1. Entity Name
FRANK'S CYCLE SHOP, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 OCT -5 PM 12: 04

Principal Place of Business
631-6 WASHBURN ROAD
MELBOURNE, FL 32934

Mailing Address
631-6 WASHBURN ROAD
MELBOURNE, FL 32934

DO NOT WRITE IN THIS SPACE



03082004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3724370

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CRAMER, WARREN
631-6 WASHBURN ROAD
MELBOURNE, FL 32934

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept, the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

NAME	D
NAME	CRAMER, WARREN
STREET ADDRESS	631-6 WASHBURN ROAD
CITY, ST, ZIP	MELBOURNE, FL 32934
NAME	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
NAME	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
NAME	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
NAME	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

700041948027
10/18/04--01007--009 **150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-864

DOUGLASS A. PERSON, CPA, P.A.
CERTIFIED PUBLIC ACCOUNTANTS

September 22, 2004

Eula Peterson
Division of Corporations
Annual Report/Uniform Business Report Section
P.O. Box 6327
Tallahassee, FL 32314

SUBJECT: FRANK'S CYCLE SHOP, INC.
Ref. Number: P01000033324

Dear Eula,

I am the accountant for the above named taxpayer and I am responding to a letter my client received.

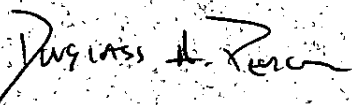
I sent to you on July 7, 2004, a copy of the original Annual Report and the check, both dated March 8, 2004, submitted to register my client with the Department of State. This information was returned.

The 2004 For Profit Corporation Annual Report was filed and paid in a timely matter. It apparently was lost in the mail because the check was not cashed. Please abate the \$400.00 late fee as my client did file this report in a timely matter.

Please accept the enclosed report and newly written check and register my client with the State of Florida.

If you should have any questions, please do not hesitate to contact me personally.

Sincerely,
DOUGLASS A. PERSON, CPA, P.A.



Douglass A. Person

DAP/dlk
Enclosures
Cc: Frank's Cycle Shop, Inc.